bupropion hydrochloride

Wellbutrin, Wellbutrin SR, Zyban

Pharmacologic class: Aminoketone
Therapeutic class: Antidepressant, smoking-cessation aid
Pregnancy risk category B

Action

Unknown; believed to decrease neuronal reuptake of dopamine, serotonin, and norepinephrine in CNS. Action as smoking-cessation aid may result from noradrenergic or dopaminergic action.

Availability

Tablets: 75 mg, 100 mg
Tablets (sustained-release): 100 mg, 150 mg, 200 mg

Indications and dosages

➢ Depression

Adults: Initially, 100 mg P.O. b.i.d. (morning and evening). After 3 days, may increase to 100 mg t.i.d. After 4 weeks, may increase to a maximum dosage of 450 mg/day in divided doses. No single dose should exceed 150 mg. With total daily dosage of 300 mg, wait at least 6 hours between doses; with total daily dosage of 450 mg, wait at least 4 hours between doses. Alternatively, give one 150-mg sustained-release tablet daily; increase to 150-mg sustained-release tablet b.i.d. based on clinical response.

➢ Smoking cessation

Adults: 150-mg sustained-release tablet once daily for 3 days, then 150-mg sustained-release tablet b.i.d. for 7 to 12 weeks. Space doses at least 8 hours apart.

Contraindications

- Hypersensitivity to drug
- Seizures
- Anorexia nervosa
- Monoamine oxidase (MAO) inhibitor use within past 14 days
- Acute alcohol or sedative withdrawal
- Breastfeeding

Administration

- Avoid bedtime doses because they may worsen insomnia.
- Know that drug shouldn't be withdrawn abruptly.

Route	Onset	Peak	Duration
P.O.	Unknown	2 hr	Unknown
P.O. (sustained)	Unknown	3 hr	Unknown

Adverse reactions

CNS: agitation, headache, insomnia, mania, psychoses, depression, dizziness, drowsiness, tremor, anxiety, nervousness, **seizures**
CV: hypertension, hypotension, tachycardia, palpitations, **complete atrioventricular block**
EENT: blurred vision, amblyopia, auditory disturbances, epistaxis, rhinitis, pharyngitis
GI: nausea, vomiting, dyspepsia, abdominal pain, flatulence, mouth ulcers, dry mouth, altered taste, increased or decreased appetite
GU: urinary frequency, nocturia, vaginal irritation, testicular swelling
Metabolic: hyperglycemia, hypoglycemia, syndrome of inappropriate antidiuretic hormone secretion, increased libido
Musculoskeletal: arthralgia, myalgia, leg cramps, twitching, neck pain
Respiratory: bronchitis, increased cough, dyspnea
Skin: photosensitivity, dry skin, pruritus, rash, urticaria, diaphoresis, skin temperature changes
Other: weight gain or loss, hot flashes, fever, allergic reaction, flulike symptoms

Interactions

Drug-drug. *Benzodiazepine withdrawal, corticosteroids, other antidepressants, over-the-counter stimulants, phenothiazines, theophylline:* increased risk of seizures
Cimetidine: inhibition of bupropion metabolism
Levodopa, MAO inhibitors: increased risk of adverse reactions
Ritonavir: increased bupropion blood level
Drug-diagnostic tests. *Glucose:* increased level
Drug-behaviors. *Alcohol use or cessation:* increased risk of seizures
Sun exposure: increased risk of photosensitivity

Precautions

Use cautiously in:
- renal or hepatic impairment, unstable cardiovascular status
- elderly patients
- pregnant or breastfeeding patients
- children.

Patient monitoring

- Monitor blood pressure, electrocardiogram, complete blood count, and renal and hepatic function. Monitor tricyclic antidepressant (TCA) blood levels in patients taking TCAs concurrently.
- Assess patient for oral and dental problems.

Patient teaching

- Caution patient not to discontinue drug abruptly.
- Emphasize importance of frequent oral hygiene because dry mouth increases risk of caries and dental problems.
- Teach patient to avoid alcohol because it may increase risk of seizures.
- Advise patient to keep regular appointments for periodic blood testing and hepatic and renal studies.